

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000050129

Entity Name: PROCOMP SOLUTIONS, INC.

FILED  
Mar 02, 2009  
Secretary of State

## Current Principal Place of Business:

380 SEMORAN COMMERCE PLACE, STE A-111  
APOPKA, FL 32703 US

## Current Mailing Address:

380 SEMORAN COMMERCE PLACE, STE A-111  
APOPKA, FL 32703 US

## New Principal Place of Business:

380 SEMORAN COMMERCE PLACE  
STE A-111  
APOPKA, FL 32703 US

## New Mailing Address:

380 SEMORAN COMMERCE PLACE  
STE A-111  
APOPKA, FL 32703 US

FEI Number: 26-2645541

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAINES, KEN  
211 HERON BAY  
LAKE MARY, FL 32746 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HAINES, KEN  
Address: 211 HERON BAY  
City-St-Zip: LAKE MARY, FL 32746 US

Title: VD ( ) Delete  
Name: JENKINS, GARY  
Address: 1135 LEYLAND CT  
City-St-Zip: APOPKA, FL 32712 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HAINES, KEN  
Address: 211 HERON BAY  
City-St-Zip: LAKE MARY, FL 32746 US

Title: D (X) Change ( ) Addition  
Name: JENKINS, GARY  
Address: 1135 LEYLAND CT  
City-St-Zip: APOPKA, FL 32712 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEN HAINES

PD

03/02/2009

Electronic Signature of Signing Officer or Director

Date